22-35205-cgm Doc 7 Filed 04/19/22 Entered 04/19/22 12:12:25 Main Document Pg 1 of 25

			· 9 = 0. = 0	
Fill in this info	rmation to identify your	case:		
Debtor 1	Peter M Trotter			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF NEW YORK	
Case number	22-35205			
(if known)		_		Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	205,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	39,777.9
	1c. Copy line 63, Total of all property on Schedule A/B	\$	244,777.9
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	239,559.03
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	2,636.4
	Your total liabilities	\$	242,195.47
⊃ar	3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,013.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,876.00
Par	4: Answer These Questions for Administrative and Statistical Records		
ò .	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

the court with your other schedules.

Official Form 106Sum

Summary of You

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Debtor 1 Peter M Trotter Case number (if known) 22-35205

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____850.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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22-332	.03-cgm Do	C I FIIE	u 04	Pg 3 of 25	12.12.23	iviaii i	Jocu	IIICIIL
Fill in this informat	ion to identify your	case and th	is filinç					
Debtor 1	Peter M Trotter							
	First Name	Middle	Name	Last Name				
Debtor 2 Spouse, if filing)	First Name	Middle	Name	Last Name				
Inited States Bankr	uptcy Court for the:	SOUTHERN	N DIST	RICT OF NEW YORK				
Timod Glatos Barrier	aptoy Court for the.							
Case number 22-	35205						_	theck if this is ar mended filing
	A/B: Prop		an asset	t only once. If an asset fits in more than one	e category. list	the asset in		2/15
ink it fits best. Be as	s complete and accura pace is needed, attach	ate as possible	e. If two	married people are filing together, both are his form. On the top of any additional pages	equally respo	nsible for su	pplying	correct
art 1: Describe Eac	ch Residence, Buildin	g, Land, or Oth	ner Real	l Estate You Own or Have an Interest In				
Do you own or have	e any legal or equitable	le interest in ar	ny resid	lence, building, land, or similar property?				
☐ No. Go to Part 2.								
_	. •							
Yes. Where is the	e property?							
.1			What	t is the property? Check all that apply				
190 Dubois S	Street			Single-family home	Do not dedu	ct secured cla	ims or e	exemptions. Put
Street address, if av	ailable, or other description	1	_	Duplex or multi-unit building	the amount	of any secure	d claims	on Schedule D: red by Property.
				Condominium or cooperative	Orcanors W	no nave cian	10 0000	rea by 1 toperty.
				Manufactured or mobile home				
Pine Bush	NY 12	566-0000		Land	Current valuentire proper			ent value of the on you own?
City	State	ZIP Code		Investment property	\$20	5,000.00		\$205,000.00
					Describe th	e nature of y	our owr	nership interest
			Who	Other has an interest in the property? Check one	(such as fee a life estate		ancy by	the entireties, or
			VVIIO	Debtor 1 only	Fee simp			
Orange				,				
County				•	— Chack	if this is com	munity	nronerty
				At least one of the debtors and another		ructions)	munity	property
				r information you wish to add about this ite erty identification number:	m, such as loc	al		
			ow	es \$236,410 (1st & 2d mortgages)				

Official Form 106A/B Schedule A/B: Property page 1 22-35205-cgm Doc 7 Filed 04/19/22 Entered 04/19/22 12:12:25 Main Document Pg 4 of 25

If you own or have with the Wyndham Vaca PO Box 98940 Street address, if available	ave more than	one, list here:		
Wyndham Vaca PO Box 98940				
PO Box 98940	tion December	What is the property? Check all that apply		
	ition Resorts	☐ Single-family home		red claims or exemptions. Put secured claims on Schedule D:
	ole, or other description	Duplex or multi-unit building		e Claims Secured by Property.
	,	Condominium or cooperative		
			Current value of th	ne Current value of the
Las Vegas	NV 8919	93-8940 🔲 Land	entire property?	portion you own?
City	State Z	IP Code Investment property	\$0.	.00 \$0.00
		Timeshare		
		☐ Other		re of your ownership interest le, tenancy by the entireties, o
		Who has an interest in the property? Chec	. 116	
		Debtor 1 only	Tenancy by the	e Entirety
Clark		Debtor 2 only		
County		Debtor 1 and Debtor 2 only		
		At least one of the debtors and another		s community property
		Other information you wish to add about	,	
		property identification number:	uno nom, odon do local	
		owes \$570, to surrender		
pages you have at		. Write that number here	=>	\$205,000.00
neone else drives. If y Cars, vans, trucks, t	you lease a vehicle	itable interest in any vehicles, whether they are rege, also report it on Schedule G: Executory Contracts a lity vehicles, motorcycles		any vehicles you own that
neone else drives. If y	you lease a vehicle	e, also report it on Schedule G: Executory Contracts a		any vehicles you own that
eone else drives. If y Cars, vans, trucks, to No	you lease a vehicle	e, also report it on Schedule G: Executory Contracts a	nd Unexpired Leases. Do not deduct secu	ured claims or exemptions. Put
eone else drives. If y Cars, vans, trucks, t No Yes	you lease a vehicle ractors, sport uti	e, also report it on Schedule G: Executory Contracts a litry vehicles, motorcycles	Do not deduct secuthe amount of any s	
Cars, vans, trucks, t No Yes 1 Make: Dodge	you lease a vehicle ractors, sport uti	e, also report it on Schedule G: Executory Contracts a lity vehicles, motorcycles Who has an interest in the property? Check one	Do not deduct secuthe amount of any secutions Who Have	ured claims or exemptions. Put secured claims on <i>Schedule D:</i> re Claims Secured by Property.
Cars, vans, trucks, to No Yes 1 Make: Dodge Model: Duran	you lease a vehicle tractors, sport uti	who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secuthe amount of any s	ured claims or exemptions. Put secured claims on <i>Schedule D:</i> re Claims Secured by Property.
Cars, vans, trucks, to No Yes 1 Make: Dodge Model: Duran Year: 2004	you lease a vehicle tractors, sport uti	who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secuthe amount of any some Cereditors Who Hav	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property. Current value of the

Official Form 106A/B

Filed 04/19/22 Entered 04/19/22 12:12:25 22-35205-cgm Doc 7 Main Document Pa 5 of 25 Debtor 1 Case number (if known) 22-35205 **Peter M Trotter** 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... Household furniture & furnishing including electronics, tools, \$5,000.00 portable grill, portable garage 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... \$1.500.00 2 handguns, 4 rifles, 4 shotguns 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$500.00 Wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... \$100.00 Costume jewelry 13. Non-farm animals

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

□ No

Yes. Describe.....

☐ Yes. Give specific information.....

Examples: Dogs, cats, birds, horses

Dog

\$50.00

22-35205-cgm Doc 7 Filed 04/19/22 Entered 04/19/22 12:12:25 Main Document Pa 6 of 25 Case number (if known) 22-35205 Debtor 1 **Peter M Trotter** Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$7.150.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Checking - all **Social Security** funds, which are not estate property, JPMorgan Chase \$4,000,00 42 USC §407 \$25.00 Savings JPMorgan Chase 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

□ No

Yes. List each account separately.

Type of account: Institution name:

Pension with loan **NYSLRS** \$26,818.91

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

Institution name or individual: ☐ Yes.

22-35205-cgm Doc 7 Filed 04/19/22 Entered 04/19/22 12:12:25 Main Document Pg 7 of 25 Case number (if known) 22-35205 Debtor 1 **Peter M Trotter** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue

Official Form 106A/B Schedule A/B: Property page 5

☐ Yes. Describe each claim.......

22-35205-cgm Doc 7 Filed 04/19/22 Entered 04/19/22 12:12:25 Main Document Pa 8 of 25 Case number (if known) 22-35205 Debtor 1 **Peter M Trotter** 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$30,843.91 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$205,000.00 Part 2: Total vehicles, line 5 \$1,784.00 57. Part 3: Total personal and household items, line 15 \$7,150.00 Part 4: Total financial assets, line 36 58. \$30,843.91 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$39,777.91 Copy personal property total \$39,777.91

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$244,777.91

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			. 9	
Fill in this infor	mation to identify your	case:		
Debtor 1	Peter M Trotter			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT OF NEW YORK		
Case number	22-35205			
(if known)				Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	■ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption				
	190 Dubois Street Pine Bush, NY 12566 Orange County	\$205,000.00		\$13,950.00	11 U.S.C. § 522(d)(1)			
	owes \$236,410 (1st & 2d mortgages) Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	2004 Dodge Durango 160,000 miles SPS impound lot	\$1,784.00		\$1,784.00	11 U.S.C. § 522(d)(5)			
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	Household furniture & furnishing including electronics, tools, portable	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(3)			
	grill, portable garage Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	2 handguns, 4 rifles, 4 shotguns Line from Schedule A/B: 10.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(5)			
	Line Irom Schedule Alb. 10.1			100% of fair market value, up to any applicable statutory limit				
	Wearing apparel Line from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)			
	Line from <i>Schedule PVD</i> . 11:1			100% of fair market value, up to any applicable statutory limit				

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De	btor 1	Peter M Trotter			Case number (if known)	22-35205
		description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		tume jewelry from Schedule A/B: 12.1	\$100.00 ■		\$100.00	11 U.S.C. § 522(d)(4)
					100% of fair market value, up to any applicable statutory limit	
	Dog	from Schedule A/B: 13.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(3)
	LINE	nom Schedule A/B. 19.1			100% of fair market value, up to any applicable statutory limit	
		cking - all Social Security funds, ch are not estate property, 42	\$4,000.00			11 U.S.C. § 522(d)(10)(A)
	USC	\$ \$407: JPMorgan Chase from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
		ings: JPMorgan Chase	\$25.00		\$25.00	11 U.S.C. § 522(d)(5)
	LIIIC	Total Generalic AVB. 11.2			100% of fair market value, up to any applicable statutory limit	
		sion with loan: NYSLRS	\$26,818.91			11 U.S.C. § 522(d)(10)(E)
	Line	ITOTIT Scriedule AVB. 21.1			100% of fair market value, up to any applicable statutory limit	
3.	(Sub	you claiming a homestead exemption ject to adjustment on 4/01/25 and every			led on or after the date of adjustmer	nt.)
		No				
		Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case	?
		□ No				
		☐ Yes				

22-33	203-cgiii De	Pg 11 of 25	04/19/22 12.12.2	25 Main Duct	ament
Fill in this inform	ation to identify you				
Debtor 1	Peter M Trotter				
	First Name	Middle Name Last Name			
Debtor 2	T N	ACT III A			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ban	kruptcy Court for the:	SOUTHERN DISTRICT OF NEW YORK			
	2-35205				
(if known)					if this is an
				amend	led filing
Official Form	106D				
Schedule I	 D: Creditors	Who Have Claims Secure	ed by Property	,	12/15
	nave claims secured by this box and submit tl	y your property? nis form to the court with your other schedules.	You have nothing else to	o report on this form.	
Yes. Fill in	all of the information	pelow.			
Part 1: List All	Secured Claims				
2. List all secured of	laims. If a creditor has r	nore than one secured claim, list the creditor separat	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Mobile Life Services In	• • •	Describe the property that secures the claim:	\$2,578.69	\$205,000.00	\$2,578.69
Creditor's Name		190 Dubois Street Pine Bush, NY 12566 Orange County owes \$236,410 (1st & 2d mortgages)			
Attn: Presi 3188 Route New Wind:		As of the date you file, the claim is: Check all that apply.	I		
	City State & Zin Code	Lipliquidated			

Official Form 106D

Who owes the debt? Check one.

 \square Check if this claim relates to a

At least one of the debtors and another

☐ Debtor 1 and Debtor 2 only

community debt Date debt was incurred

Debtor 1 only

Debtor 2 only

☐ Disputed

Nature of lien. Check all that apply.

Judgment lien from a lawsuit

☐ Other (including a right to offset)

 $\hfill\square$ An agreement you made (such as mortgage or secured

 \square Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number

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Debtor 1 Peter M Trotter		Case number (if known)	22-35205	
First Name Middle N	ame Last Name			
2.2 US Bank Trust NA Creditor's Name	Describe the property that secures the claim: 190 Dubois Street Pine Bush, NY 12566 Orange County owes \$236,410 (1st & 2d	\$180,410.00	\$205,000.00	\$0.00
Attn President 300 E Delaware 9th Fl	As of the date you file, the claim is: Check all that apply.			
Wilmington, DE 19801	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.3 Walden Savings Bank	Describe the property that secures the claim:	\$56,000.00	\$205,000.00	\$31,410.00
Creditor's Name	190 Dubois Street Pine Bush, NY 12566 Orange County			
Attn President	owes \$236,410 (1st & 2d mortgages)			
15 Scotts corner Drive PO Box 690	As of the date you file, the claim is: Check all that			
Montgomery, NY 12549	apply. □ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.4 Wyndham Vacation Resorts	Describe the property that secures the claim:	\$570.34	\$0.00	\$570.34
Creditor's Name	Wyndham Vacation Resorts PO Box 98940 Las Vegas, NV 89193-8940			
Attn President	Clark County owes \$570, to surrender			
PO Box 98940	As of the date you file, the claim is: Check all that			
Las Vegas, NV 89193-8940	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			

Official Form 106D

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Debto	r 1 Peter M Trotter		Case nu	umber (if known)	22-35205
	First Name Middle Name	Last Name			
Add	the dollar value of your entries in Column A on	this page. Write that number h	iere:	\$239,559	.03
	s is the last page of your form, add the dollar va that number here:	alue totals from all pages.		\$239,559	.03
Part 2	List Others to Be Notified for a Debt Th	nat You Already Listed			
Use th trying than o	is page only if you have others to be notified alto collect from you for a debt you owe to someone creditor for any of the debts that you listed in Part 1, do not fill out or submit this page.	pout your bankruptcy for a deb	rt 1, and then list	the collection age	ncy here. Similarly, if you have more
[]	Name, Number, Street, City, State & Zip Code Friedman Vartolo LLP		On which line in	n Part 1 did you ent	er the creditor? 2.2
	1325 Franklin Avenue Ste 160 Garden City, NY 11530		Last 4 digits of	account number	-
[]	Name, Number, Street, City, State & Zip Code Michael L Zager PC		On which line in	n Part 1 did you ent	er the creditor? _2.1_
	543 Broadway Post Office Box 948 Monticello, NY 12701		Last 4 digits of	account number	-
[]	Name, Number, Street, City, State & Zip Code SN Servicing Center		On which line in	n Part 1 did you ent	er the creditor? 2.2
	Attn President 323 5th Street Eureka, CA 95501		Last 4 digits of	account number	-
[]	Name, Number, Street, City, State & Zip Code US Bank Trust NA		On which line in	n Part 1 did you ent	er the creditor? 2.2
	Attn President 55 Beattie Place Ste 110 MS005 Greenville, SC 29601		Last 4 digits of	account number	_
[]	Name, Number, Street, City, State & Zip Code Wyndham Consumer Finance Inc (p))	On which line in	n Part 1 did you ent	er the creditor? 2.4

Last 4 digits of account number ___

PÓ Box 97474

Las Vegas, NV 89195-0001

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	· ·		Pg 14 of 25			
Fill in this in	nformation to identify your c	ase:				
Debtor 1	Peter M Trotter					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)) First Name	Middle Name	Last Name			
United State	s Bankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK			
Case number	er 22-35205					
(if known)					_	heck if this is an
					ar	mended filing
Official F	orm 106E/F					
	e E/F: Creditors W	ho Have Unseci	ured Claims			12/15
Schedule G: E Schedule D: C left. Attach the	contracts or unexpired leases to executory Contracts and Unexpi- creditors Who Have Claims Secu- e Continuation Page to this page e number (if known).	red Leases (Official Form 1 red by Property. If more s _l	106G). Do not include a pace is needed, copy t	any creditors with partially he Part you need, fill it out	secured claims number the ent	that are listed in ries in the boxes on the
	ist All of Your PRIORITY Uns					
	reditors have priority unsecured	l claims against you?				
No. G	o to Part 2.					
☐ Yes.						
Part 2:	ist All of Your NONPRIORIT	/ Unsecured Claims				
	reditors have nonpriority unsec					
□ No. Yo	ou have nothing to report in this pa	rt. Submit this form to the co	ourt with vour other sche	dules.		
Yes.			,			
	f vour nannriarity unacqured ala	ima in the alphabetical are	lar of the graditar who	holds each plaim. If a great	itar baa mara thar	
unsecure	f your nonpriority unsecured cla d claim, list the creditor separately creditor holds a particular claim, lis	for each claim. For each cla	im listed, identify what ty	pe of claim it is. Do not list o	laims already incl	uded in Part 1. If more
						Total claim
4.1 Cry	stal Run Healthcare	Last 4 digits	s of account number	7415		\$75.00
155	oriority Creditor's Name Crystal Run Road Idletown, NY 10941-4028	When was t	he debt incurred?			
Num	ber Street City State Zip Code incurred the debt? Check one.	As of the da	ate you file, the claim is	s: Check all that apply		
	Pebtor 1 only	☐ Continge	ent			
	Pebtor 2 only	☐ Unliquida	ated			
	Debtor 1 and Debtor 2 only	☐ Disputed				
ПА	at least one of the debtors and ano		NPRIORITY unsecured	l claim:		
	check if this claim is for a comm	•				
debt Is th	e claim subject to offset?	☐ Obligation		ration agreement or divorce t	that you did not	
■ N	•	• •	•	g plans, and other similar del	ots	
□ Y		■ Other. Sp				
		Other. S	Decily			

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Debto	Peter M Trotter	Case number (if known) 22-35205	
4.2	Crystal Run Healthcare	Last 4 digits of account number 8347	\$212.99
	Nonpriority Creditor's Name 155 Crystal Run Road Middletown, NY 10941-4028	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical Services	
4.3	Crystal Run Healthcare	Last 4 digits of account number	\$474.05
	Nonpriority Creditor's Name 155 Crystal Run Road	When was the debt incurred?	
	Middletown, NY 10941-4028 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or and date you me, and chain to officer an area apply	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	
4.4	Crystal Run Healthcare	Last 4 digits of account number	\$30.00
	Nonpriority Creditor's Name 155 Crystal Run Road Middletown, NY 10941-4028	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical Services	
	□ 169	Utner, Specify Wedical Del Vices	

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Debic	Peter W I rotter	Case number (if known)	
4.5	New Jersey E-Z Pass	Last 4 digits of account number 5021	\$378.30
	Nonpriority Creditor's Name PO Box 4972 Trenton, NJ 08650	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Toll violations	
4.6	NVC Department of Finance	Last 4 digits of account number	\$350.00
4.0	NYC Department of Finance Nonpriority Creditor's Name Treasury & Payment Services	When was the debt incurred?	\$350.00
	Division 59 Maiden Lane New York, NY 10038 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify Unpaid parking	
4.7	NYSEG	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name PO Box 5234 Binghamton, NY 13902-5234	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Utilities	
	□ 162	Uther, Specify Unities	

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Debtor	1 Peter N	/I T	rotter		Case n	number (if known)	22-35205	
4.8			Operations Inc	Last 4 digits of account numbe	er		_	\$116.10
		nera	itor's Name al Green Way VA 22312-2413	When was the debt incurred?				
-	Number Stre	eet C	City State Zip Code he debt? Check one.	As of the date you file, the clair	m is: Chec	ck all that apply		
	Debtor 1			Пол				
	_			Contingent				
	Debtor 2	-		☐ Unliquidated				
			Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecu	red claim:			
			of the debtors and another	☐ Student loans	rea ciaiii.	•		
	debt		s claim is for a community Dject to offset?	☐ Obligations arising out of a se report as priority claims	paration a	greement or divorce	that you did not	
	■ No		,,	Debts to pension or profit-sha	ring plans.	. and other similar de	ebts	
	☐ Yes			■ Other Specify Unpaid to	•	,		
Part 3:	List Oth	ners	to Be Notified About a De	bt That You Already Listed				
5. Use the is trying have n	is page only ng to collect nore than or	r if y froi	ou have others to be notified a m you for a debt you owe to se	about your bankruptcy, for a debt tha omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad	in Parts 1	or 2, then list the	collection agency	here. Similarly, if you
	nd Address Collectio	n S	Sarvicas	On which entry in Part 1 or Part 2 did you Line 4.5 of (<i>Check one</i>):		•	site a laboratorio de la localista	
	anton Stre	_	ici vices	Line 4.3 of (Check one).			rity Unsecured Claim priority Unsecured C	
Norwo	ood, MA 0	206	52	Last 4 digits of account number	■ Part 2:	: Creditors with Non	oriority Unsecured C	iaims
Name ar	nd Address			On which entry in Part 1 or Part 2 did y	ou list the	original creditor?		
		nen	t Company	Line 4.2 of (Check one):	☐ Part 1:	Creditors with Prior	rity Unsecured Claim	IS
	x16346 urgh, PA ′	152	112-0346		Part 2:	: Creditors with Non	priority Unsecured C	laims
FILLSDI	urgii, FA	132	.42-0340	Last 4 digits of account number				
	nd Address			On which entry in Part 1 or Part 2 did ye	ou list the	original creditor?		
		nen	t Company	Line 4.3 of (Check one):			rity Unsecured Claim	
	x16346 urgh, PA ′	152	42-0346		Part 2:	: Creditors with Non	priority Unsecured C	laims
	J ,			Last 4 digits of account number				
Name ar	nd Address			On which entry in Part 1 or Part 2 did ye				
NCC	0450			Line <u>4.8</u> of (<i>Check one</i>):	Part 1:	Creditors with Prior	ity Unsecured Claim	IS
	x 9156 ndria, VA	223	R04-0156		Part 2:	Creditors with Non	priority Unsecured C	laims
Alexai	idila, VA		0100	Last 4 digits of account number				
NJ EZ	nd Address Pass (p) Iarisol Alv	/ara	ado	On which entry in Part 1 or Part 2 did you Line 4.5 of (Check one):	☐ Part 1:	Creditors with Prior	rity Unsecured Claim	
			way Ste 200		■ Part 2:	: Creditors with Nonj	priority Unsecured C	laims
Newar	k, NJ 071	14-	2562	Last Addition of a second months				
				Last 4 digits of account number				
Part 4:	Add the	An	nounts for Each Type of U	nsecured Claim				
	the amounts f unsecured			ims. This information is for statistica	l reporting	g purposes only. 2	B U.S.C. §159. Add	the amounts for each
						Total	l Claim	
T-1-1	6	6a.	Domestic support obligation	s	6a.	\$	0.00	
Total claims								
from Pa		6b.	Taxes and certain other debt		6b.	\$	0.00	
		6c. 6d.	•	injury while you were intoxicated secured claims. Write that amount here.	6c. 6d.	\$ \$	0.00	
	,	Ju.	riad an other priority un	sssa.sa sianno. TTINO triat arribant Here.	ou.	φ	0.00	

Official Form 106 E/F

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Peter M Trotter Case number (if known) 22-35205

Debtor 1 P	eter M T	rotter	Case no	umber (if known)	22-35205
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total	Claim
otal	6f.	Student loans	6f.	\$	0.00
aims om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	2,636.44
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	2,636.44

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			. 9	
Fill in this inform	nation to identify your	case:		
Debtor 1	Peter M Trotter			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK	
Case number	22-35205			
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3	Oity		Olate	Zii Oddc	
0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	Oity		Otate	ZII Ooue	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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		ı	Pg 20 of 25		
Fill in thi	s information to identify your	case:			
Debtor 1	Peter M Trotter				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK		
Case nur	mber 22-35205				
(if known)					☐ Check if this is an
					amended filing
Ott: -:-	-l				
	al Form 106H	_			
Sche	dule H: Your Code	ebtors			12/15
ill it out, our nam	and number the entries in the e and case number (if known). you have any codebtors? (If y	boxes on the left. Attach . Answer every question.	the Additional Page to	this page. On the top	eded, copy the Additional Page, of any Additional Pages, write
■ Ye	es				
	thin the last 8 years, have you na, California, Idaho, Louisiana,				states and territories include
■ No	o. Go to line 3.				
□Y€	es. Did your spouse, former spou	ıse, or legal equivalent live	with you at the time?		
			•		
in lir Forn	e 2 again as a codebtor only if	f that person is a guarant	tor or cosigner. Make su	ire you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZII	P Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1	Sandra Trotter			■ Schedule D, line	e 2.1
	190 Dubois Street Pine Bush, NY 12566			☐ Schedule E/F, I	ine
	Fille Busil, NT 12300			☐ Schedule G	_
				Mobile Life Supp	ort Services Inc
2.0	Conduc Trett-			_	
3.2	Sandra Trotter 190 Dubois Street			Schedule D, line	
	Pine Bush, NY 12566			☐ Schedule E/F, I	ine
	,			☐ Schedule G Wyndham Vacation	n Bosorto
				vvvnonam vacati	OU RESOUS

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supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question information. Describe Employment Debtor 1 Debtor 2 or non-filing spouse
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK Case number (If known) Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: MM / DD/ YYYY Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every questing the proposed information. Debtor 1 Debtor 2 or non-filing spouse
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK Case number (If known) 22-35205 Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: MM / DD/ YYYY Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every questing the post of the po
Case number (If known) Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: MM / DD / YYYY Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question information. Debtor 1 Debtor 2 or non-filing spouse
Official Form 106I Schedule I: Your Income 12 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question provided information. Debtor 1 Debtor 2 or non-filing spouse
Official Form 106I Schedule I: Your Income 12 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question 1 1. Fill in your employment 1. Debtor 1 Debtor 2 or non-filing spouse
Official Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question people are filing together (Debtor 1 and Debtor 2 or non-filing spouse) Part 1: Debtor 2 or non-filing spouse
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question pages are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question pages in the page of th
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question information. Describe Employment Debtor 1 Debtor 2 or non-filing spouse
supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question information. Describe Employment Debtor 1 Debtor 2 or non-filing spouse
information. Debtor 1 Debtor 2 or non-filing spouse
V control of the con
Francisco de la company de la
information about additional employers. Not employed Not employed
Occupation Disabled Unemployed
Include part-time, seasonal, or self-employed work. Employer's name
Occupation may include student or homemaker, if it applies.
How long employed there?
Part 2: Give Details About Monthly Income
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or
non-filing spouse
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$
3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ 0.00

Official Form 106l Schedule I: Your Income page 1

Deb	otor 1	Peter M Trotter	_	Case	number (if known)	22-35205	5	
				For	Debtor 1	For Deb	tor 2 or g spouse	
	Cop	by line 4 here	4.	\$_	0.00	\$	0.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00	
	5e.	Insurance	5e.	\$_	0.00	\$	0.00	
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.	\$_ \$	0.00	\$ \$	0.00	
	5g. 5h.	Other deductions. Specify:	5g. 5h.+	· —	0.00	· · ·	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	850.00	<u> </u>	0.00	
	8b.	Interest and dividends	8b.	\$ 	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		Ψ_	0.00	<u> </u>	0.00	
		settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	2,691.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: minor children 's SSDI	8f.	\$	1,472.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	- \$_ 	0.00	+ \$	0.00	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5,013.00	\$	0.00	
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$		5,013.00 + \$	0.0	00 = \$	5,013.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Incl othe Do	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r depen			ted in Sched	<i>dule J</i> . 1. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certailies				a, if it	2. \$	5,013.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	1?				Combin monthly	ed income
		Yes. Explain: Debtor's daughter graduates high school in Jun benefits of \$736, reducing debtor's income to \$4 moving into debtor's residence in approx. 6 mor	I, 277. I	Debto	r's mother ha	as health is	ssues and	will be

Debtor's daughter graduates high school in June 2022 and will no longer have social security benefits of \$736, reducing debtor's income to \$4,277. Debtor's mother has health issues and will be moving into debtor's residence in approx. 6 months. She will be contributing to expenses in an amount not yet dtermined. Debtor's mother wil be selling her residence of 714 Linden St., Ogdensburg NY within said 6 months period, and debtor will receive 50% of the net sale proceeds which sum will be contributed to his Chapter 13 Plan.

Eill	in this informa	tion to identify yo	nur casa:			Ī		
						Observ	de Walter Se	
Deb	tor 1	Peter M Trot	ter				ck if this is: An amended filing	
Deb	tor 2						A supplement show	wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankr	ruptcy Court for the	: SOUTH	ERN DISTRICT OF NEW	YORK	-	MM / DD / YYYY	
1		2-35205						
(If k	nown)							
O	fficial Fo	rm 106J						
		J: Your	Evner	1606				12/15
Be info	as complete a ormation. If m mber (if know	and accurate as	s possible eded, atta ry questio	. If two married people a ch another sheet to this				or supplying correct
1.	Is this a joir		enoia					
	■ No. Go to	line 2.	in a senar	ate household?				
	□ 103. D00		пт и осриг	ate nousenoid.				
			st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		16	Yes
					Doughtor		10	□ No
					Daughter			■ Yes □ No
					Spouse		n/a	■ Yes
					<u> </u>			■ res □ No
								☐ Yes
3.	expenses of	penses include f people other t d your depende	han _	No Yes				
Par	t 2: Estim	ate Your Ongoi	ina Month	lv Expenses				
Est	imate your ex	penses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp				
• •		s paid for with	non-cash	government assistance i	f you know			
the		h assistance an		cluded it on Schedule I:			Your exp	enses
4.		or home owners and any rent for th		uses for your residence.	nclude first mortgag	e 4. \$	i	1,454.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$;	0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
	4c. Home	maintenance, re	epair, and	upkeep expenses		4c. \$		0.00
_		owner's associa				4d. \$		0.00
5	Additional r	mortaage navm	onte tor W	nur residence , such as ho	me equity loans	5 \$		506.00

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Debtor 1 Peter M Trotter		Case num	ber (if known)	22-35205
6. Utilities:				
6a. Electricity, heat, natural gas		6a.	\$	350.00
6b. Water, sewer, garbage collection		6b.	\$	0.00
6c. Telephone, cell phone, Internet, satelli	te, and cable services	6c.	\$	240.00
6d. Other. Specify:	,	6d.	·	0.00
. Food and housekeeping supplies		— 7.	\$	800.00
Childcare and children's education costs		7. 8.	\$	0.00
		9.	\$	
<i>5, 3, 3</i>			·	0.00
). Personal care products and services		10.	\$	20.00
Medical and dental expenses	and an inches	11.	\$	70.00
 Transportation. Include gas, maintenance, be Do not include car payments. 	ous or train fare.	12.	\$	100.00
B. Entertainment, clubs, recreation, newspap	ners manazines and hooks	13.	\$	0.00
Littertailment, clubs, recreation, newspaper. Littertailment, clubs, recreation, newspaper. Littertailment, clubs, recreation, newspaper.	_	14.	\$	
•	iations	14.	Φ	0.00
5. Insurance.	r nov or included in lines 4 or 20			
Do not include insurance deducted from your 15a. Life insurance	pay of included in lines 4 of 20.	15a.	\$	0.00
15b. Health insurance		15a. 15b.	·	
			·	86.00
15c. Vehicle insurance		15c.	·	200.00
15d. Other insurance. Specify:		15d.	\$	0.00
5. Taxes. Do not include taxes deducted from y	our pay or included in lines 4 or 20.	40	•	
Specify:		16.	\$	0.00
7. Installment or lease payments:		47	•	
17a. Car payments for Vehicle 1		17a.	*	0.00
17b. Car payments for Vehicle 2		17b.		0.00
17c. Other. Specify:		17c.		0.00
17d. Other. Specify:		17d.	\$	0.00
3. Your payments of alimony, maintenance,				0.00
deducted from your pay on line 5, Schedu		18.		0.00
 Other payments you make to support other 	ers who do not live with you.		\$	0.00
Specify:		19.		
 Other real property expenses not included 	d in lines 4 or 5 of this form or on Schee			
20a. Mortgages on other property		20a.	\$	0.00
20b. Real estate taxes		20b.	\$	0.00
20c. Property, homeowner's, or renter's ins	urance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expe	enses	20d.	\$	0.00
20e. Homeowner's association or condomir	nium dues	20e.	\$	0.00
. Other: Specify: Pet care		21.	·	50.00
ret care			- Ψ	30.00
2. Calculate your monthly expenses				
22a. Add lines 4 through 21.			\$	3,876.00
22b. Copy line 22 (monthly expenses for Deb	otor 2), if any, from Official Form 106J-2		\$	· .
22c. Add line 22a and 22b. The result is you			\$	3,876.00
ridd iirio LLd diid LLD. Trio roodit is you				3,070.00
3. Calculate your monthly net income.				
23a. Copy line 12 (your combined monthly in	income) from Schedule I.	23a.	\$	5,013.00
23b. Copy your monthly expenses from line	22c above.	23b.	-\$	3,876.00
, ,				-,
23c. Subtract your monthly expenses from	your monthly income.			
The result is your <i>monthly net income</i> .		23c.	\$	1,137.00
, , ,				
4. Do you expect an increase or decrease in				
For example, do you expect to finish paying for you	r car loan within the year or do you expect your	mortgage	payment to incre	ease or decrease because o
modification to the terms of your mortgage?				
■ No.				
☐ Yes. Explain here:				

Fill in this information to id	dentify your case:			
	/ Trotter			
First Name		Last Name		
Debtor 2				
(Spouse if, filing) First Name	Middle Name	Last Name		
United States Bankruptcy Co	ourt for the: SOUTHERN DIS	STRICT OF NEW YORK		
Case number 22-35205				
(if known)			☐ Check if this is an amended filing	
If two married people are fi You must file this form whe obtaining money or proper	ling together, both are equally			
Sign Below				
Did you pay or agree	to pay someone who is NOT a	an attorney to help you fill out bank	ruptcy forms?	
■ No				
Yes. Name of per	son		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)	
Under penalty of perju		he summary and schedules filed w	ith this declaration and	
X /s/ Peter M Trott	er	x		
X /s/ Peter M Trotter Peter M Trotter Signature of Debtor		X Signature of Deb	itor 2	